Columbia University TeenScreen Program

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Overview

• Overview of TeenScreen Program
• Links Between Mental Illness and Suicide in Youth
• Pilot Research
• Transforming Science to Service
  • Programmatic changes
  • Developing a national strategy
• TeenScreen: Today and Tomorrow
TeenScreen Program Overview
The Columbia University TeenScreen Program is a national mental health and suicide risk screening program dedicated to helping parents find teens with the known risk factors for suicide by making voluntary mental health check-ups available to all American families.

- National mental health screening program focused on:
  - Early identification of mental illness (internalizing disorders)
  - Suicide prevention in youth
  - Linking those in need with further assessment

- TeenScreen does not involve diagnosis or treatment

- Community-based partnerships to develop screening programs

- Funded by private foundations, individuals and organizations
Potential Screening Settings

- Schools
- School-Based Health Centers
- Doctors’ Offices and other medical settings
- Clinics
- Drop-In Centers
- Shelters
- Residential Treatment Facilities
- Juvenile Justice Settings
Links Between Mental Illness and Suicide in Youth
Mental Illness and Young People

• 10% of U.S. children and adolescents suffer from a serious mental disorder that causes significant functional impairment at home, at school and with peers

• Twenty-one percent of U.S. children ages 9 to 17 have a diagnosable mental or addictive disorder that causes at least minimal impairment

• In any given year, only 20% of children with mental disorders are identified and receive mental health services

• Half of all mood, anxiety, impulse-control and substance-use disorders start by age 14

Kessler et al., 2005
Links Between Mental Illness and Suicide

• Suicide is the 3rd leading cause of death for 11-18 year-olds

• 90% of teens who die by suicide suffer from a treatable mental illness at their time of death

• Psychiatric symptoms developed more than a year prior to death in 63% of completed teen suicides

• In only 4% of cases, psychiatric symptoms developed within the 3 months immediately prior to the suicide

• Suicide is not the unpredictable event we once thought it was

CDC 2008 (WISQARS) (reviewed 4/2/2008)
Shaffer et al., 1996
Pilot Research
TeenScreen History

1991: Pilot Study

1995: Public Service Screening Projects

1998: Follow-Up Study

1999: National TeenScreen Program Pilot

2003: National TeenScreen Program Launch

2007: 507 sites in 43 states
Screening Identifies Unknown Teens

- One-half of suicidal teens were not known to either school or mental health professionals
- One-third of highest-risk teens were not known to either school or mental health professionals
- Less than 2% of highest-risk teens were known to a mental health professional

Scott et al., 2004
4-6 Year Outcomes for Screened Teens

- 26% of teens who screen positive for suicidality in high school will make a later attempt or meet criteria for a mood disorder as young adults.

- High school screening correctly identifies 2/3 of those who make a later suicide attempt or experience MDD as young adults.

Scott et al., 2004; Shaffer et al., 1998
Indicates the importance of screening for suicide risk

Results suggest that screening may identify those teens who may not bring attention to themselves, as well as those who are younger and at earlier stages of disorder development or manifestation

✓ It is these teens who may not be identified by school and/or mental health professionals
Transforming Science to Service
Transforming Science to Service

- **Programmatic Changes:** Make necessary changes to program structure and develop supportive materials to ensure the program is adaptable for community implementation.

- **Develop National Strategy:** Create support and momentum for mental health screening through raising public awareness, media outreach, public policy and advocacy.
Programmatic Changes:

- Screening Questionnaires
- Screening Procedures
- Supportive Materials
- Program Development Support and Training
- Intake and Strategic Outreach
National Strategy:

- Develop National Advisory Council
- Develop PATH
  - 34 National Organizations Endorse Mental Health Screening
  - White Paper: Catch Them Before They Fall
  - Media Campaign
  - Influence State and Federal Policy
  - Identify Funding Streams
  - Demonstration Projects
  - Encourage and Support Viral Growth
# National Support for Screening

- Supporters of Youth Mental Health Screening -

- American Academy of Child and Adolescent Psychiatry
- American Association for Marriage and Family Therapy
- American Federation of Teachers
- American Managed Behavioral Healthcare Association
- American Mental Health Counselors Association
- American Psychological Association
- American Psychological Association
- Anxiety Disorders Association of America
- Bazelon Center for Mental Health Law
- Child and Adolescent Bipolar Foundation
- Children and Adolescents with Attention-Deficit/Hyperactivity Disorder
- Consumer Organizing and Networking Technical Assistance Center
- Depression and Bipolar Support Alliance
- Federation of Families for Children’s Mental Health
- Girls and Boys Town
- International Association of Psychosocial Rehabilitation Services
- International Society of Psychiatric-Mental Health Nurses
- National Alliance for the Mentally Ill
- National Association of County Behavioral Health Directors
- National Association of School Nurses
- National Association of School Psychologists
- National Association of Secondary School Principals
- National Association of State Mental Health Program Directors
- National Council for Community Behavioral Healthcare
- National Education Association
- National Empowerment Center
- National Mental Health Association
- National Mental Health Consumers’ Self-Help Clearinghouse
- President’s New Freedom Commission on Mental Health
- School Social Work Association of America
- Suicide Prevention Advocacy Network USA
- Tara National Association for Personality Disorders
- Tourette Syndrome Association
- United States Conference of Catholic Bishops
Media Campaign:

- Colloquium: Creating Coverage that Makes a Difference
- TeenScreen in the Press
- Media Monitoring
- Letters to the Editor
- Driving Traffic to Website
- Advertising: Catch Them Before They Fall
Presidential Support for Screening

- New Freedom Commission on Mental Health -

- Early detection and treatment of mental disorders can result in a substantially shorter and less disabling course of illness

- Schools are in a key position to identify mental health problems and provide a link to appropriate services

- Strong mental health programs in schools can attend to the health and behavioral concerns of students, reduce unnecessary pain and suffering, and help ensure academic achievement

- The Columbia University TeenScreen Program is highlighted as a model screening program for youth
Federal Support for Screening Grows - SAMHSA and DOE

**SAMHSA: Adolescents at Risk Grants**

- Almost $2 million for school districts, tribes and non-profits
- Awardees include local TeenScreen programs in Tulsa, OK and Washington, DC

**DOE Integration of Schools and Mental Health Systems Grants**

- $5 million grant program to increase student access to mental health care through innovative approaches
- Awardees include local TeenScreen programs in Alhambra, CA and Amityville, NY
Federal Support for Screening

- Garrett Lee Smith Memorial Act -

- Signed into law on October 21, 2004.
- Original legislation authorized $82 million over 3 years for the development of youth suicide prevention and intervention programs.
- In December 2007, the Garrett Lee Smith Grant program was funded at the $39.4 million level for FY 2008, and was one of the few federal mental health programs where the increase proposed in the federal omnibus bill exceeded the across-the-board cut, with an over $3 million increase above FY 2007 funding levels.
- In the first round of funding, 37 grants totaling $9.7 million were awarded for FY 2005 to fund the development and implementation of youth suicide prevention programs. Fourteen of these grants totaling $5.5 million were given to states and tribes for efforts in developing youth suicide and early intervention programming.
- Grants totaling over $14 million were funded in 2006 to 36 states and tribes to support statewide and tribal activities to develop and implement youth suicide prevention and early intervention strategies (22 of these were new grants awards).
- In 2007, 38 grants, totaling over $15 million, were funded to states and tribes to fund suicide prevention programming.
- Eleven grantees, nine states (AZ, IA, ID, LA, MT, NV, NY, OH, WI) and two American Indian Tribes (Standing Rock Sioux – ND & SD; United Indian Involvement – CA) will implement TeenScreen with these funds.
State Suicide Prevention Plans

- There are 41 states that have suicide prevention plans in place
- 34 of those state plans encourage mental health screening as a means to prevent suicide
- Of those 34, seven states specifically mention TeenScreen as a model screening program (NY, FL, IA, NE, NM, OR, VT)

Suicide Prevention Resource Center (2007)
Media Campaign:

- Colloquium: Creating Coverage that Makes a Difference
- TeenScreen Press
- Media Monitoring
- Letters to the Editor
- Driving Traffic to Website
- Advertising
Today

• Currently 507 Local Screening Sites

• Sites in 43 State, Panama, South Korea, Guam and Colombia

Tomorrow

• New School-Based Materials

• Screening in Medical Settings

• Military Families

• High-Risk Populations
Contact Us:

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